PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10824606

		CLAIMS A	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			5			•		RATE	FEE]	RATE	FEE
FC	DR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	minus 20=		*	Ø		X\$ 9=		OR	X\$18=	v
INE	DEPENDENT C	LAIMS	2 minus 3 =		*	0]	X43=	· .	OR	X86=	0
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	W
* If	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	column 2	ı	TOTAL		OR	TOTAL	270
	C	LAIMS AS A	MENDED - PART II				OTHER THAN					
		(Column 1)		(Colun		(Column 3)	_	SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1	X\$ 9=		OR	X\$18=	,
	Independent	*	Minus	***	CI AINA	<u> -</u>	[X43=		OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	_
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA	$\Big] \Big[$	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	OL 4144	=	↓	X43=	:	OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
							L	TOTAL DDIT. FEE	·	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)									٠.			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	-	=	 	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						!	+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							L	TOTAL		OR.	TOTAL	
***	f the "Highest Nu	mber Previously Pa nber Previously Paid nber Previously Paid	id For IN THIS	S SPACE is	less tha	n 3, enter "3."	~	ODIT. FEE L		. ,	NDDIT. FEE L Jmn 1.	
	giiosi itdii	J J	, , total or	copende	,	gg. ridinibe					•	•